Office of Attorney General Student Alien Report (Form B)

This form may be completed by the designated school official, their designee, or any college/university employee. Please fill out the information in the gray area of each section.

PART I – Institution Information:

| School Name | | | | | | | | | | |
|--|----------------------------|--------------|------|------------|-------------------------------|-----------|------|----|--|---|
| Address1 | | | | | | | | | | |
| Address2 | | | | | | | | | | |
| City | | | | | State | :e | | ip | | - |
| INS School Code | | | | | | | | | | |
| INS School Approval Date | | | | | SEVIS Enrolled (Check if yes) | | | | | |
| Contact Info: First Name | | Last Name | | | Phone | | - | - | | |
| PART II – Student Biographical and Visa Information: | | | | | | | | | | |
| ID (Social Security Number or Student ID Number) | | | | | | | | | | |
| Family Name | | | Give | n Name | | | | | | |
| Address1 | | | | | | | | | | |
| Address2 | | | | | | | | | | |
| City | | | | | State | 2 | Z | ip | | - |
| Country of Birth (2 character country code)* Date | | | | | f Birth | | | | | |
| Level of Study | dy Course of Study (Major) | | | | | | | | | |
| Country of Citizenship (country code)* Admission Number 1 | | | | nber (Froi | m I-94) | | | | | |
| Port of Entry | | | | | | Date of E | ntry | | | |

Part III – Narrative: School and school officials are encouraged to voluntarily report below all facts and circumstances indicating that a student on campus may be unlawfully present in the United States, or enrolled in a course of study without proper authorization.

Date of Report:

^{*}To view country codes, go to section 2 of the instructions page.